CERTIFICATE OF SERVICE

AUG 3 0 2006 The undersigned hereby certifies that on copy of Defendant Dr. Sisar Paderes' Notice of Taking Oral Deposition was served on the following at his/her last known address via U.S. mail, postage prepaid as follows:

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DATED: Honolulu, Hawaii, ____

AUG 3 0 2006

Deputy Attorney General

Attorney for Defendant DR. SISAR PADERES